

California MEDICAL ASSOCIATION

NOTICES & REPORTS

Transactions of the House of Delegates

Los Angeles, April 29 to May 2, 1956

IN LIEU OF REPORTING the entire transcript of the sessions of the House of Delegates of the California Medical Association in its 1956 Annual Session, the transactions of the House are given here in abstract form.

The resolutions introduced in the House of Delegates are printed in full under three categories: (1) Those adopted as introduced or as amended, (2) those referred to the Council of the Association, and (3) those not adopted. In each instance pertinent comments from the reports of reference committees as adopted by the House of Delegates are appended.

A complete transcript of all proceedings, taken verbatim by a court reporter, is on file in the office of the Association and available for inspection by any member.

RESOLUTIONS ADOPTED

RESOLUTION No. 1

Introduced by: C.M.A. Council.

Subject: Commendation to Dwight H. Murray, M.D.

WHEREAS, The California Medical Association's own beloved and respected Dr. Dwight H. Murray of Napa, California, currently President-Elect of the American Medical Association, will soon become the President of the American Medical Association; and

WHEREAS, Dr. Murray has attained this high honor because of his life-long devotion to the ever-advancing standard of medical care for the people of his state and nation and the welfare of his confreres; now, therefore, be it

Resolved, That the California Medical Association, duly meeting in convention convey to Dr.

Murray our every best wish for a year of successful leadership for American medicine; and be it further

Resolved, That this resolution be suitably printed and presented to our distinguished member, Dr. Dwight H. Murray.

RESOLUTION No. 2

Introduced by: C.M.A. Council.

Subject: Commendation of Physicians in Flood Areas.

WHEREAS, Residents of many northern California counties suffered severe hardships in the recent floods; and

WHEREAS, Physicians from the stricken areas and the surrounding counties, often at the risk of their own lives, provided 'round the clock medical care; now, therefore, be it

Resolved, That the members of the California Medical Association salute the excellent efforts of their colleagues and nominate them the "Doctors of the Year" for 1956.

(Reference Committee No. 3 noted in its report: The Council wishes to commend physicians in the flood areas for their outstanding work.)

DONALD A. CHARNOCK, M.D. President
FRANK A. MacDONALD, M.D. President-Elect
JAMES C. DOYLE, M.D. Speaker
J. NORMAN O'NEILL, M.D. Vice-Speaker
DONALD D. LUM, M.D. Council Chairman
ALBERT C. DANIELS, M.D. Secretary-Treasurer
IVAN C. HERON, M.D. Chairman, Executive Committee
DWIGHT L. WILBUR, M.D. Editor
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RESOLUTION No. 3

Introduced by: C.M.A. Council.

Subject: California State Alcoholic Rehabilitation Commission.

WHEREAS, The State of California has established a program for the study for control of alcoholism; and

WHEREAS, A state Alcoholic Rehabilitation Commission has been established and given adequate financing; and

WHEREAS, The program of this Commission is now about to be determined and put into operation; now, therefore, be it

Resolved, That the California Medical Association advise the California State Alcoholic Rehabilitation Commission of the Association's belief that alcoholism is a medical problem which demands professional skills and that the Association is prepared to lend every assistance toward the solution of this serious moral, physical and economic problem.

(Reference Committee No. 3 noted in its report: The Council offers assistance to the California State Alcoholic Rehabilitation Commission in its program for the study and control of alcoholism.)

RESOLUTION No. 4

Introduced by: C.M.A. Council.

Subject: California Physicians' Insurance Corp.

WHEREAS, California Physicians' Insurance Corp. is completely organized and has been authorized by the Insurance Commissioner of the State of California to sell certain policies of indemnity insurance applicable to the costs of medical, surgical and hospital care; and

WHEREAS, Good business practice suggests the wisdom of offering such policies for sale on a statewide basis; now, therefore, be it

Resolved, That the officers and directors of California Physicians' Insurance Corp. be requested to prepare and offer for sale, throughout the area in which the corporation is authorized to write insurance, such policies of indemnity insurance as best serve the needs of the public.

(The C.P.S. Reference Committee noted in its report: Your committee was fortunate in having before it Dr. Hollis L. Carey, chairman of the Commission on Medical Services, who reported that this resolution was unanimously approved by the Commission and subsequently approved by the C.M.A. Council, for the purpose of making available on a state-wide basis policies of indemnity insurance through California Physicians' Insurance Corporation.)

RESOLUTION No. 5

Introduced by: C.M.A. Council.

Subject: Publication of House of Delegates Proceedings.

WHEREAS, It has been customary for the California Medical Association to publish in full the transcript of each meeting of its House of Delegates; and

WHEREAS, Such publication involves a long period of time to receive, edit and prepare the transcript for publication and to distribute the printed copies of CALIFORNIA MEDICINE; and

WHEREAS, It would be possible to publish with a minimum of delay a digest of the positive actions taken by the House of Delegates, including resolutions adopted and the results of elections; now, therefore, be it

Resolved, That the House of Delegates request the Council to develop a more rapid form of publication of the transactions.

(Reference Committee No. 3 noted in its report: The Council wishes to avoid delay in the publication of the proceedings of the House of Delegates by publishing a digest of the proceedings. To facilitate action by the Council . . . [the committee offered an amendment which was adopted, making the resolution read as above.])

RESOLUTION No. 7

Introduced by: A. A. Kirchner.

Representing: Los Angeles County.

Subject: Telephone Listings.

WHEREAS, The population of the State of California continues its phenomenal growth; and

WHEREAS, Many of the new residents of the state depend upon the telephone directories for the establishment and maintenance of medical contacts; and

WHEREAS, The present style of listing in the classified telephone directories of medical doctors as "Physicians and Surgeons" is confusing with other licensed doctors in the State of California; and

WHEREAS, For the benefit of the residents of the State of California and for the elimination of confusion, it would be for the best interests of all concerned that those persons holding an M.D. degree be listed as "Doctors of Medicine, M.D."; now, therefore, be it

Resolved, That the California Medical Association, acting through this House of Delegates, request the Pacific Telephone and Telegraph Company and all other allied associations or other telephone systems in the State of California that hereafter they will list all licensed physicians and surgeons holding an unrevoked medical doctor's degree in the various telephone directories, including those known as "classified directories" as "Doctors of Medicine, M.D."; and be it further

Resolved, That the secretary of the California Medical Association be instructed to circulate this

resolution to all telephone companies doing business within the State of California.

(Reference Committee No. 3 noted in its report: This resolution is intended to avoid the confusion of present listings of Doctors of Medicine in the classified sections of telephone directories.)

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RESOLUTION No. 8

Introduced by: Frederic Ewens.

Representing: Southwest Branch, Los Angeles County Medical Association.

Subject: Better Distribution of Salk Vaccine.

WHEREAS, Members of this branch of the Los Angeles County Medical Association have found it impossible to obtain any polio vaccine since January, 1956, from either private sources or from the Public Health Department; and

WHEREAS, Investigation of this problem has revealed that large quantities of the vaccine have been manufactured; and

WHEREAS, Families have been demanding polio vaccine for their children under the age of 15 years; and

WHEREAS, Members of our branch have had families request the vaccine be administered by their private physician rather than a public agency; and

WHEREAS, The public realizes there is a great demand for the use of the vaccine by public agencies but insists that a larger percentage of this vaccine should be made available for private distribution; now, therefore, be it

Resolved, That the California Medical Association's Commission on Public Health and Public Agencies be instructed to take such steps as it is able to assure as equitable and fair local distribution of Salk vaccine as is possible under prevailing conditions of supply, and that it be vigilant in taking such actions as may be required hereunder.

(Reference Committee No. 3 noted in its report: This resolution is intended to correct any existing inequities in the distribution of the Salk vaccine. Your committee feels that it is desirable for this program to be kept on a voluntary basis. It is believed that more rapid action will be forthcoming if this is maintained on a local level.)

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RESOLUTION No. 9

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Lectures on Medical Ethics.

WHEREAS, In these times of increasing pressure, close scrutiny and greater demands, it is of paramount importance that relations between physicians as well as patient-physician relationships reflect the

highest credit on the physician and on the medical profession; now, therefore, be it

Resolved, That the American Medical Association be urged to request each medical school to assign a member of the clinical faculty to give at least three hours of formal lectures on medical ethics, professional conduct and manners each year to members of the senior class.

(Reference Committee No. 3 noted in its report: This resolution emphasizes the necessity of training medical students in the principles of ethical practice. Your committee has amended the "resolved" portion of the resolution by inserting the words "conduct and manners" after the word "ethics.")

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RESOLUTION No. 11

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Nursing Education Trends.

WHEREAS, There is an increasing trend toward abandonment of nursing schools by private hospitals of this State; and

WHEREAS, Public schools and colleges will assume an increasing role in the education of nurses; and

WHEREAS, The education and clinical training of nurses is of utmost importance to all persons, hospitals and physicians in our state; now, therefore; be it

Resolved, That the House of Delegates of the California Medical Association instruct the Committee on Medical Education and Hospitals to study these trends and advise those concerned with these problems.

(Reference Committee No. 3 noted in its report: This resolution is concerned with changing trends in nursing education with emphasis on the increasing roles played by public schools and colleges. Your committee is in favor of the intent of this resolution. Inasmuch as a Committee on Medical Education and Hospitals exists, the "resolved" portion has been changed to read ... [as above].)

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RESOLUTION No. 12

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Advertising Standards.

WHEREAS, A year ago the American Medical Association discontinued the awarding of Council seals and advertising emblems to products and advertising copy which met acceptance requirements; and

WHEREAS, Increased pressure is sometimes being brought in the placing of advertising copy by the advertisers; and

WHEREAS, It is the duty and the prerogative of each medical society to maintain high standards for the acceptance of advertising copy in its official publications; and

WHEREAS, CALIFORNIA MEDICINE has established rules governing the acceptance of advertising copy; now, therefore, be it

Resolved, That the C.M.A. urge county medical societies in California independently to adopt advertising rules similar to the advertising rules for CALIFORNIA MEDICINE, which are based on high standards of quality of product and proven accuracy of the advertising, and be it further

Resolved, That the delegates to the American Medical Association be instructed to inform other state delegations of the necessity of an overall uniform code in medical advertising.

(Reference Committee No. 3 noted in its report: Your committee believes that every effort should be made to maintain the highest level of advertising in all journals and publications.)

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RESOLUTION No. 14

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Provision of Medical Care.

WHEREAS, There are groups of persons in this state, namely the aged, handicapped and disabled, the chronically ill and dependent children, who do not possess the means or health requirements which will allow them to purchase any type of health insurance; and

WHEREAS, It is desirable that the best medical care be provided for these groups and that such care must be financed by the tax moneys of the local community and the state in which such persons reside; and

WHEREAS, Such medical care may be afforded with greater dignity and efficiency by the use of existing hospital facilities in the local community as well as the professional services of physicians in the local area in which such persons reside; and

WHEREAS, Such care may be provided at less cost to the communities by the use of said existing facilities and professional services than by the creation of federal or state hospitals, panels and bureaucracies; now, therefore, be it

Resolved, That California Medical Association study the development of an insurance program which may provide for the health needs of the named groups and persons, which program may be made available to those communities within this state who have not already made provision for such groups or who may in the future request this type of care for the above named groups and persons.

(The C.P.S. Reference Committee noted in its report: Your committee is impressed with the need for meeting the issues of the day with the practical action of encouraging prepaid care for the groups mentioned in the resolution.)

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RESOLUTION No. 15

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Care for Rural Groups.

WHEREAS, There has been concern in nation and state that rural groups and persons have not enjoyed the advantages of health insurance as fully as those in urban areas; and

WHEREAS, It is desirable that such insurance be made available to those groups and persons; now be it

Resolved, That the California Medical Association direct California Physicians' Service and/or California Physicians' Insurance Corp. to continue to prosecute the sale of existing services to such groups and persons and that California Medical Association develop new types of contracts, if needed, to provide for the health insurance needs of those in rural areas.

(The C.P.S. Reference Committee noted in its report: Delegates attending the committee hearing expressed great interest in making C.P.S. or C.P.I.C. coverage available to rural groups and persons. Suggestions were offered as to how physicians might assist C.P.S. in stimulating interest and making known the advantages of such coverage among patients in rural areas. Approval of this resolution will implement attempts to solve a very real problem in providing coverage for a large segment of California's population not now so protected.)

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(Resolutions No. 16, 17, 18 and 19 were combined by Reference Committee No. 3 into one substitute resolution, which was adopted. The original resolutions are shown here so that their intent may be seen. The substitute resolution of the Reference Committee is shown at the conclusion of the item following Resolution No. 19, under the heading "Comments by Reference Committee No. 3.")

RESOLUTION No. 16

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Tissue and Surgical Committees.

WHEREAS, It is recognized professional standards of hospitals may be enhanced by the activities of Tissue and Surgical Committees; and

WHEREAS, Failure to keep detailed records may jeopardize hospital accreditation for intern and resident training; and

WHEREAS, The rules and regulations of the Joint Commission on an accredited hospital may be subject to individual interpretation by the inspectors of hospitals; now, therefore, be it

Resolved, That the Joint Commission on Accreditation of Hospitals be asked to review and revise its rules and regulations regarding Tissue and Surgical Committees to the extent that no inspector by personal interpretation of these rules and regulations may penalize any hospital for failure to keep detailed minutes of the meetings of the Tissue and Surgical Committees.

RESOLUTION No. 17

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Staff Meetings.

WHEREAS, The requirement of the Joint Commission on Accreditation that 75 per cent of each hospital staff attend quarterly or monthly meetings at each hospital of which a physician is a staff member was presumably designed to promote better patient care; and

WHEREAS, As the majority of such hospital meetings are now conducted they do not so serve; and

WHEREAS, The proper place for postgraduate instruction of practicing physicians is at medical society or medical school meetings; and

WHEREAS, Such attendance should be strictly on a voluntary basis; and

WHEREAS, The review of the work of staff members at hospitals can be accomplished more properly and thoroughly in small meetings such as tissue committee, surgical committee and executive committee meetings than where a large number of the staff are present; now, therefore, be it

Resolved, That our delegates to the A.M.A. be instructed to urge the adoption by the Joint Commission on Accreditation of the ruling that attendance at hospital staff meetings should be entirely on a voluntary basis.

RESOLUTION No. 18

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Joint Commission Approval.

WHEREAS, The objectives and general policies of the Council on Medical Education, the Residency Review Committees, the Specialty Board and the Joint Commission on Accreditation are laudable, and they have resulted in improved graduate training and patient care; and

WHEREAS, The application of certain policies appears to have been arbitrary, has been abrupt, and has been disruptive of training programs and hos-

pital operations, and such actions have impaired the acceptance of policies which are recognized to have a constructive purpose which merits acceptance; now, therefore, be it

Resolved, That the aforementioned bodies dealing with approval of intern and residency training programs and hospital accreditation be requested to:

1. Dissociate the approval of education programs from hospital accreditation except that accreditation remain a prerequisite to approval of graduate educational programs;

2. Maintain separate inspectors and inspections to determine the fitness of a hospital for accreditation and educational programs;

3. Withdraw approval or place limitations upon the approval of an existing training program only after discussion with the Chief of the Department involved, the Chief of Staff, the Hospital Administrator, and the Chairman of the Education Committee, if such exists, thereby insuring that these representatives of the hospital staff and administration be informed of the reasons for such contemplated withdrawal or limitation, thus providing an opportunity for correction of deficiencies;

4. Furnish copies of all communications relative to such matters to the Chairman of the Board of Trustees, the Administrator, the Chief of Staff and the Chief of the Department involved.

5. Delay, except in aggravated instances, the withdrawal of approval of a training program for a reasonable period of time, thereby permitting the correction of deficiencies and avoiding the harmful effects upon training programs and hospital operation incurred by abrupt withdrawal of approval.

RESOLUTION No. 19

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Postgraduate Training Requirements.

WHEREAS, The work of the Council on Medical Education and Hospitals and its allied groups has resulted in better training facilities for interns and residents; and

WHEREAS, Some of the requirements of these groups have inadvertently resulted in:

1. An accumulation of house staff at university and government hospitals, thus leaving private hospitals without an adequate house staff, and

2. The private hospitals' opening outpatient clinics which are in direct competition with the private practice of medicine; and

WHEREAS, A young physician should be adequately trained in all the facets of medicine in-

cluding the care of a sufficient number of indigent and private patients; and

WHEREAS, Many private hospitals are not desirous of entering the private practice of medicine; now, therefore, be it

Resolved, That the C.M.A. request the A.M.A. Council on Medical Education and Hospitals and its allied groups to review their requirements for postgraduate training as they apply to private hospitals and the necessity of outpatient clinics in such hospitals which do not desire to enter the private practice of medicine.

(Reference Committee No. 3 noted in its report: Resolution No. 16 deals with rules and regulations regarding tissue and surgical committee meeting minutes. Resolution No. 17 has to do with compulsory attendance at staff meetings. The subject of No. 18 is the inspection of and withdrawal or limiting of approval of training programs. Requirements for postgraduate training in so far as they apply to establishment of outpatient clinics by private hospitals is the subject of resolution No. 19.

Your committee recognizes the possible need for continued change in the rules and regulations of the Joint Commission as set forth in resolutions 16, 17, 18 and 19. We believe, however, that while it is probably within our right as a state medical association to suggest changes, it is more becoming that we point out to the Commission areas or fields which should be further studied and revised rather than make demands for specific changes. We therefore offer this substitute resolution in lieu of resolutions 16, 17, 18 and 19.

Whereas, The Stover Committee of the A.M.A. is studying the structure and activities of the Joint Commission on Accreditation of Hospitals; now, therefore, be it

Resolved, That the delegates of the C.M.A. to the A.M.A. be instructed to emphasize to the Stover Committee the contents of resolutions 16, 17, 18 and 19, copies of which will be provided for the delegates to the A.M.A.)

RESOLUTION No. 20

Introduced by: Gerald W. Shaw.

Representing: Los Angeles County.

Subject: Collection of Medical Fees by Hospitals.

WHEREAS, Medicine has traditionally provided free medical care for indigent patients; and

WHEREAS, Medicine has urged the avoidance of such indigencies by voluntary health and accident insurance programs; and

WHEREAS, Certain hospitals have instigated a policy of collecting and retaining fees for medical professional services rendered by staff physicians from clinic patients who maintain health insurance programs; and

WHEREAS, This collection and retention of professional service fees is illegal and morally and ethically indefensible; now, therefore, be it

Resolved, That the California Medical Association is unalterably opposed to the collection and retention of fees for professional services by any hospital, whether it be a profit or nonprofit organization; and be it further

Resolved, That a copy of this resolution be forwarded to the Board of Medical Examiners for their action.

(Reference Committee No. 3 noted in its report: This resolution reemphasizes an existing problem regarding the practice of medicine by hospitals. Since the existing authority of the Medical Practice Act is sufficient to control this practice, we have amended the resolution to read [as above].)

RESOLUTION No. 21

Introduced by: Robert Helms.

Representing: Long Beach Branch, Los Angeles County Medical Association.

Subject: Indoctrination of Interns and Residents.

WHEREAS, Interns and residents completing their periods of hospital service in California are not always well informed of the advantages of private practice and of the help offered them by the California Medical Association in locating and in beginning a practice; and

WHEREAS, Closed panel systems may at times seem to offer greater remuneration and opportunity; now, therefore, be it

Resolved, That the House of Delegates recommend that each component county medical society having an intern and resident training program within its area appoint a committee for the purpose of informing the interns and residents of the advantages of the private practice of medicine and of the functions and activities of the C.M.A.; and be it further

Resolved, That the facilities of the C.M.A. be made available to assist in this program wherever desired.

(Reference Committee No. 3 noted in its report: This problem which deals with indoctrination of interns and residents deserves consideration.)

RESOLUTION No. 22

Introduced by: Robert Lee Dennis.

Representing: Santa Clara County.

Subject: Identification of Resolutions.

WHEREAS, A resolution passed by the House of Delegates of the C.M.A. may have been presented to the House of Delegates by a person other than the author of the resolution; and

WHEREAS, A resolution may reflect a very considerable amount of research and work by the author on the subject matter of the resolution; and

WHEREAS, Committees and organizations to which a resolution may finally be submitted for action may be not only desirous of the advice and assistance of the resolution's author but in addition may require papers and reports of the background work of the resolution; now, therefore, be it

Resolved, That henceforth all resolutions presented to the House of Delegates of the C.M.A. will be identified by the name of the author or authors; and be it further

Resolved, That all modifications or amendments of the original resolution passed by the House of Delegates of the C.M.A. will be indicated by appropriately placed footnotes, and that the committee or person responsible for the amendments will be additionally identified.

(Reference Committee No. 3 noted in its report: This resolution is concerned with the loss of original content and author identity of resolutions through various amendments and revisions by committees, both in the C.M.A. and the A.M.A.)

RESOLUTION No. 26

Introduced by: Lewis T. Bullock.
Representing: Los Angeles County.
Subject: Rabies Control.

WHEREAS, Universal vaccination with chick embryo vaccine has been proven to be a safe, reliable and effective method for the control of rabies in animals; and

WHEREAS, Failure on a local level to utilize available public health measures has led to a rising incidence of rabies, the loss of livestock and a constant hazard to the lives of Californians; and

WHEREAS, Because of rapid and universal transportation rabies can be diminished only by a statewide control program;

Resolved, That the California Medical Association restate its support of universal vaccination of all dogs for the control of rabies; and be it further

Resolved, That copies of this resolution be forwarded to the Governor of California, the appropriate legislative committees and the State Director of Public Health.

(Reference Committee No. 3 noted in its report: This resolution will serve to affirm our support of measures intended to correct the ever increasing problem of rabies control in California.)

RESOLUTION No. 27

Introduced by: William Kaiser.
Representing: Alameda-Contra Costa County.
Subject: Industrial Accident Fee Schedule.

WHEREAS, The work of the Industrial Accident Fee Committee, under the chairmanship of Dr. Francis J. Cox, during past years has resulted in an improvement of the California Industrial Accident Commission Fee Schedule; and

WHEREAS, This improvement leaves great strides still to be made; now, therefore, be it

Resolved, That the committee be extended the congratulations of this House for their accomplishment; and be it further

Resolved, That the Medical Services Commission be urged to continue their vigorous efforts toward the necessary further improvement of the Industrial Accident Fee Schedule.

(Reference Committee No. 3 in its report: Offered the above resolution as a substitute for the original.)

RESOLUTION No. 28

Introduced by: William Kaiser.
Representing: Alameda-Contra Costa County.
Subject: Liability in First Aid.

WHEREAS, It is a hardship for doctors of medicine to treat roadside accident cases under present circumstances in which their liability for such treatment is not clear; now, therefore, be it

Resolved, That this House direct the appropriate committees of the California Medical Association to investigate the advisability of legislation clearly outlining and defining the responsibility of a physician who voluntarily treats an accident victim at the scene of an accident.

(Reference Committee No. 3 noted in its report: This problem of liability in first aid is recognized as a serious one which can confront any one of us. Without being aware of any reasonable means of solution, your committee certainly feels the subject is worthy of further consideration. We recommend that it *do pass* and be referred through the Council to the appropriate committee.)

RESOLUTION No. 29

Introduced by: T. D. Englehorn.
Representing: Monterey County.
Subject: Medical Expert Testimony.

WHEREAS, Medical expert testimony in personal injury lawsuits is becoming increasingly more important in the courts of California and much of the testimony is being presented by practitioners of medicine not qualified as experts in the particular field in which they are testifying; and

WHEREAS, Such testimony is often confusing, conflicting, unintelligent and at times biased, and results only in confusion of both judge and jury; and

WHEREAS, A system for obtaining impartial medical testimony has been established in Minnesota and in New York; now, therefore, be it

Resolved, That the California Medical Association's Council, through such committee as it may determine, explore all possibilities for improving the present situation, and that it consult with the State Bar and other interested groups and report its findings to this House of Delegates.

(Reference Committee No. 3 noted in its report: Here in the problem of medical expert testimony, we are confronted with a problem which affects all of us and one which deserves further study and consideration.)

RESOLUTION No. 31

Introduced by: Robert Smalley.

Representing: Mendocino-Lake County.

Subject: "Grass Roots" Education Against Socialized Medicine.

WHEREAS, The members of the California Medical Association and the American Medical Association are frequently asked to send telegrams to congressmen to influence impending legislation against socialized medicine; and

WHEREAS, In spite of this, there is a continued drift both toward socialism and socialized medicine; and

WHEREAS, Well informed medical men are unanimously agreed that socialized medicine and socialism are detrimental to the health and welfare of the country; and

WHEREAS, The best progress in combating this evil was made when a firm of press agents were retained by the American Medical Association and conducted a countrywide "grass roots" educational campaign against socialism and socialized medicine; and

WHEREAS, Similar progress has not been made since their services were discontinued; now, therefore, be it

Resolved, That the California Medical Association reaffirm its support of a "grass roots" educational campaign; and be it further

Resolved, That the California delegates to the American Medical Association introduce a similar resolution in the House of Delegates of the American Medical Association.

(Reference Committee No. 3 recommended against adoption of the resolution as not being needed, but the House of Delegates approved an amendment and voted the amended resolution as it appears above.)

RESOLUTION No. 32

Introduced by: Edgar F. Mauer.

Representing: Los Angeles County.

Subject: Armed Forces Medical Library.

WHEREAS, The Armed Forces Medical Library contains the world's greatest collection of medical literature; and

WHEREAS, Its present housing is inadequate and dangerous and prevents proper use of this material; and

WHEREAS, A bill has been introduced in the Congress to establish a National Library of Medicine with adequate quarters; now, therefore, be it

Resolved, That the California Medical Association support the establishment of a National Library of Medicine in a new and adequate building and that all California senators and congressmen be requested to support this proposal.

(Reference Committee No. 3 noted in its report: This resolution indicates our support of a worthy project, namely, a National Library of Medicine.)

RESOLUTION No. 33

Introduced by: Dave F. Dozier.

Representing: Sacramento County Medical Society.

Subject: Trustees of C.P.S.

WHEREAS, The President of the California Physicians' Service in his year of activity acquires and has in his possession much official and unofficial knowledge relative to the welfare of California Physicians' Service, its beneficiaries and physician members; and

WHEREAS, Present by-laws, on occasion, terminate his position not only as President but also as member of the California Physicians' Service Board of Trustees, thereby occasioning serious loss of this knowledge to C.P.S. and its Board; now, therefore, be it

Resolved, That Chapter VII of the by-laws of California Physicians' Service be amended by adding a new section, No. 1(b), to said Chapter VII, to read as follows:

"Sec. 1(b). In addition to the trustees elected or appointed as otherwise in these by-laws provided, the immediate past-president shall serve as a trustee, with all of the rights and privileges of such office, for a period of one year after the termination of his tenure as president, regardless of eligibility as to consecutive terms. The immediate past-president shall serve in addition to the authorized number of trustees specified in Chapter VI, Sec. 1 of these by-laws."

(The C.P.S. Reference Committee noted in its report: By way of explanation, the present by-laws of

California Physicians' Service authorize the trustees to make any change in the by-laws that may seem necessary, with the one exception that amendments relating to a change in the number of trustees must be approved by this House of Delegates. The by-laws of C.P.S. further provide that this House of Delegates may amend at any regular annual session, such amendment to become effective immediately. Therefore, if the foregoing amendment is adopted, it will be effective immediately.)

RESOLUTION No. 34

Introduced by: Ernest F. Elmore.

Representing: Santa Clara County.

Subject: Automobile Safety Devices.

WHEREAS, It is the aim of Doctors of Medicine to prevent as well as to treat injury and disease; and

WHEREAS, Many medical man hours, much suffering and cost are involved in repairing the human damages resulting from automobile accidents; and

WHEREAS, Studies and experiences have indicated that deaths and injuries resulting from motor car accidents can be reduced markedly by safety devices designed to protect the occupants of motor cars; and

WHEREAS, Some of the protective and safety devices are readily available and can be installed with a minimum of cost and inconvenience, while other changes to effect greater safety and to reduce deaths and injuries can be made only in the design and manufacture of automobiles; therefore, be it

Resolved, That the California Medical Association urges every owner of an automobile to install available safety devices in his car; and be it further

Resolved, That the California Medical Association urges each automobile manufacturer to expand research concerning safety and to produce automobiles equipped with additional safety features and devices; and be it further

Resolved, That the California Medical Association urges the California Senate and Assembly to study this problem of automobile safety with one of the objects being to require certain minimum standards of equipment; and be it further

Resolved, That copies of this resolution be forwarded to (1) the appropriate legislative committee of our State Senate and Assembly, (2) the Director of Public Relations of each of the automobile manufacturers, and (3) to the C.M.A. delegates to the A.M.A. for action in the House of Delegates of the A.M.A.

(Reference Committee No. 3 noted in its report: Your committee is heartily in accord with the intent of this resolution urging the use of automobile safety devices.)

RESOLUTIONS REFERRED TO COUNCIL

The following resolutions were, by action of the 1956 House of Delegates, referred to the Council of the California Medical Association for further study, action or report, as indicated in each item.

RESOLUTION No. 6

Introduced by: Jay J. Crane.

Representing: Los Angeles County.

Subject: Private Practice of Medicine in Tax-Supported Facilities.

WHEREAS, The House of Delegates of the California Medical Association on May 3, 1955, adopted a resolution reaffirming the unalterable opposition of the California Medical Association to corporate and tax-subsidized medical practice; and

WHEREAS, The resolution also opposed a tax-supported medical school engaging in the practice of medicine and the levying of fees and collection thereof for professional services; and

WHEREAS, Full time members of the medical faculties of tax-supported medical schools are engaged in the private practice of medicine for their own account using facilities supported and supplied by tax-supported medical schools; and

WHEREAS, This private practice of medicine is conflicting with the principles of private enterprise and inimical to the rights of the private practitioner of medicine; and

WHEREAS, The House of Delegates by resolution should evolve rules and regulations governing the private practice of full-time medical faculty members of tax-supported medical schools; now, therefore, be it

Resolved, That the California Medical Association, acting through its House of Delegates, proclaim and issue the following rules:

1. Full-time members of the medical faculty of a governmental or tax-supported medical school may engage in private practice only in private offices and private hospitals and not in offices or hospitals supported or maintained by tax money.

2. That if the medical requirements of a private patient are such that the necessary equipment for proper treatment is available only within a governmentally or tax-supported facility or hospital, then and in that event, such equipment may be available for the treatment of a private patient, but only on the same basis and privileges that any indigent patient receives and without any charge being made for professional services. If similar equipment becomes available in a private medical facility or hospital, then the private patient must be treated or referred to the private medical facility or hospital.

3. Private practice by full-time members of a medical faculty of a governmentally or tax-supported medical school contrary to the foregoing rules shall be considered unethical practice.

(Reference Committee No. 3 noted in its report, as amended on the floor of the House: "This resolution states (1) that full-time members of medical faculties of government or tax-supported medical schools may engage in private practice only in private offices and private hospitals and not in offices or hospitals supported or maintained by tax money and (2) private practice by full-time members of a medical faculty of a governmentally or tax-supported medical school contrary to the foregoing rules shall be considered unethical practice. Your committee recognizes the importance of the problems set forth by this resolution. We believe, however, that the magnitude of the problem is such that it requires further and prolonged study and should be referred to the Council, the Council to refer to a committee the question of the private practice of medicine by physicians whose facilities are provided for them by institutions, this committee to report yearly to the Council.")

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RESOLUTION No. 23

Introduced by: Robert Lee Dennis.

Representing: Santa Clara County.

Subject: Narcotic Drug Addiction.

WHEREAS, The illicit use of narcotic drugs has increased alarmingly in the United States during the past fifteen years; and

WHEREAS, To the newly addicted persons an ever increasing percentage of teen-age children are being added; and

WHEREAS, The illegal traffic in drugs flourishes because of the staggering rewards which it offers to the unscrupulous; and

WHEREAS, The present attempted method of control is a punitive and prohibitive one, failing to recognize that while the unaddicted purveyor of illegal narcotics is a criminal of contemptible character, drug addiction itself is overwhelmingly a problem of sickness and not one of crime; and

WHEREAS, The punitive approach alone to the control of narcotics addiction drives the addicts under cover and forces them to a situation of desperation in which they are often obliged to push the drug, infecting others, and to engage in criminal acts, ranging from prostitution to shoplifting, and from armed robbery to murder in order that they may obtain a supply of drugs; and

WHEREAS, It is believed that the problem could be better solved by a combined punitive and therapeutic approach the first arm of which would be the offering of narcotics of good quality by legally and medically controlled clinics to all existing proven narcotic addicts, thus forcing ruin upon the illicit traffic at its economic source, bringing the

narcotic addict to the surface where he could be counted, registered, evaluated and treated, and changing drug addiction from a criminal offense to a remediable illness and the second arm of which would be the strengthening of our laws against and punishments of the unaddicted dealers and peddlers of illegal drugs; and

WHEREAS, These steps combined with a thorough-going program of education should result in an ever-diminishing number both of new addictions and of crimes committed by addicts; and

WHEREAS, It is believed that the medical profession has never before offered its organized assistance to the correction of drug addiction; now, therefore, be it

Resolved, That the House of Delegates of the California Medical Association offers to the legally constituted governmental bodies responsible for the control of narcotics the full assistance of the California Medical Association in correcting the misuse of narcotic drugs; and be it further

Resolved, That the House of Delegates of the California Medical Association approves and hereby directs the Council and appropriate committees of the California Medical Association under the Council to press for: (1) The establishment of clinics wherever needed in California in which narcotics of good quality will be offered at cost to all proven existing narcotic addicts under a system of legal and medical control to be determined by study; (2) fundamental changes in our laws which will increase the punishments administered to persons found guilty of selling, transferring or handling narcotic drugs illegally to the extent that the traffic will be extremely hazardous and unattractive, and (3) an intensive program of public education whereby the effects and dangers of narcotic drugs will be made known; and be it further

Resolved, That the House of Delegates of the California Medical Association hereby directs its delegates to the House of Delegates of the American Medical Association to present and press for adoption of an appropriately worded similar resolution in the House of Delegates of the American Medical Association at its next regular session.

(Reference Committee No. 3 noted in its report: Your committee wishes to recognize not only the importance of the subject of this resolution but also the excellence of the author's presentation . . . Your committee recommends that this resolution be referred to the Council.)

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RESOLUTION No. 24

Introduced by: James H. Thompson.

Representing: San Francisco County.

Subject: Definition of Specialist.

WHEREAS, Specialists are recognized by both the public and the medical profession; and

WHEREAS, It is essential that some definition of a specialist be established; and

WHEREAS, The definition will be made by insurance companies or other lay organizations if the medical profession does not take steps to make such a qualification; now, therefore, be it

Resolved, That the Council of C.M.A. request the Medical Services Commission to study and make recommendations as to the standards for qualification of specialists in the various specialty fields.

(Reference Committee No. 3 noted in its report: While recognizing the problem which has stimulated the introduction of this resolution, which deals with the definition of a specialist, your committee feels that a request for an existing Commission to study and make recommendations in a matter which cannot be settled on a basis of a single state, is an oversimplification. We therefore recommend that this resolution be referred to the Council of the C.M.A.)

RESOLUTION No. 35

Introduced by: Frank Robinson.

Representing: San Diego County.

Subject: Private Practice of Medicine in Medical Institutions.

WHEREAS, The House of Delegates of the California Medical Association on May 3, 1955, adopted a resolution reaffirming the unalterable opposition of the California Medical Association to corporate and tax-subsidized medical practice; and

WHEREAS, The resolution also opposed a tax-supported medical institution engaging in the practice of medicine and the levying of fees and collection thereof for professional services; and

WHEREAS, Full-time members of the medical faculties of tax-supported medical institutions are engaged in the private practice of medicine for their own account using facilities supported and supplied by tax-supported or corporate medical institutions; and

WHEREAS, This private practice of medicine is conflicting with the principles of private enterprise and inimical to the rights of the private practitioners of medicine; and

WHEREAS, The House of Delegates by resolution should evolve definite policies with respect to the private practice of medicine by members of the profession practicing in tax-supported institutions; now, therefore, be it

Resolved, That the California Medical Association, acting through its House of Delegates, proclaim and issue the following policies:

1. Members of the Medical faculty of a tax-supported or corporate institution may engage in

private practice only in private offices and private hospitals and not in offices or hospitals supported or maintained by tax or corporate monies.

2. That if the medical requirements of a private patient are such that the necessary equipment for proper treatment is available only within a governmentally or tax-supported facility or hospital, then and in that event, such equipment may be available for the treatment of a private patient. If similar equipment becomes available in a private medical facility or hospital, then the private patient must be treated or referred to the private medical facility or hospital.

3. Private practice by members of a medical faculty of a tax-supported or corporate institution contrary to the foregoing policies shall be considered unethical practice.

(Reference Committee No. 3 noted in its report: Your committee finds that this resolution concerning the private practice of medicine in medical institutions is identical in intent with that of the resolution No. 6 introduced by Jay J. Crane of Los Angeles County under the subject of "Private Practice of Medicine In Tax-Supported Facilities." Therefore, your committee recommends referral to the Council for consideration along with resolution No. 6.)

RESOLUTION No. 36

Introduced by: Arthur A. Marlow.

Representing: San Diego County.

Subject: All Medications Prescribed Should be Labelled with the Names of Their Contents.

WHEREAS, The number and brands of medications have been increasing at a tremendous rate; and

WHEREAS, Increasing travel has resulted in vast numbers of persons carrying unlabelled medications which cannot be identified readily; and

WHEREAS, Undesirable and sometimes dangerous side effects of medications are frequent and require immediate identification of such medication; and

WHEREAS, A physician, without knowledge of the nature of a previously prescribed medication, may prescribe additional and, therefore, excessive dosage of a medication; now, therefore, be it

Resolved, That the California Medical Association instruct its delegates to the American Medical Association to introduce a resolution at the next meeting of the House of Delegates recommending that all medications prescribed be labelled with the names of their contents.

(Reference Committee No. 3 noted in its report: Your committee recognizes the need stated in this resolution which has as its subject the labelling of medications prescribed with the names of their contents. We have heard considerable testimony on this resolution and, after careful consideration, we believe that

action on this matter should be postponed. We therefore recommend that this resolution be referred to the Council for study and action by an appropriate committee.)

RESOLUTIONS NOT ADOPTED

The following resolutions were introduced but not adopted by the House of Delegates. Comments by the reference committee appended to each resolution give the reasons for the recommendation of negative action.

RESOLUTION No. 13

Introduced by: Matthew N. Hosmer.
Representing: San Francisco County.
Subject: C.M.A. Public Relations.

WHEREAS, Public relations efforts are of great importance to each county society as well as to the California Medical Association; and

WHEREAS, Each county has different public relations problems and programs to meet these needs; and

WHEREAS, Many county societies have developed effective public information programs; and

WHEREAS, The bulk of monies available are spent at the state level; now, therefore, be it

Resolved, That the C.M.A. take immediate and effective action to develop a long-range public relations program based upon integration, and subsidy when desired and indicated, of public relations programs of individual county societies, emphasizing more realistic programs on doctor-patient relationships.

(Reference Committee No. 3 noted in its report: Your committee is aware of the local problems of county societies and their branches with respect to public relations but upon due consideration it is our opinion that the Public Relations Department of the C.M.A. is fulfilling the intent of this resolution. We further believe that it would be poor policy and financially unfeasible to allocate C.M.A. monies to local groups. We therefore recommend that this resolution do not pass.)

RESOLUTION No. 25

Introduced by: George Houck.
Representing: Santa Clara County.
Subject: Insurance Forms.

WHEREAS, A steadily increasing proportion of the professional contacts of physicians and surgeons with their patients is involved with insurance carriers, and the cost of processing the forms of the insurance carriers has become both a major problem and a significant expense in the offices of all physicians and surgeons; and

WHEREAS, The expense of this work is properly a cost of the business of the insurance carrier and should not be passed on to the physician or, indirectly, to the other patients of the physician who are not covered by insurance; now, therefore, be it

Resolved, That the House of Delegates of the California Medical Association instruct the officers of the California Medical Association to discuss the problem with representatives of insurance carriers, requesting that a reasonable fee be paid for the completion of claim forms that insurance companies find necessary for the conduct of their own business.

(Reference Committee No. 3 noted in its report: Your committee is aware of the annoyance caused by endless insurance forms. We do not feel, however, that the insured should be penalized through a charge to the carriers. We would like to call attention to the almost universal adoption of the standard form which can be obtained from the C.M.A. This form facilitates and simplifies the handling of insurance claims. We further urge that the C.M.A. continue its efforts toward universal adoption of its standard form. Your committee recommends that this resolution do not pass.)

RESOLUTION No. 30

Introduced by: William H. Thompson.
Representing: San Mateo County.
Subject: Retirement Benefits for Physicians.

WHEREAS, Present Federal legislation does not allow self-employed physicians retirement planning benefits as are available to most citizens under a compulsory or voluntary plan; and

WHEREAS, The majority of California physicians desire such benefits; and

WHEREAS, It is not known whether a majority of physicians desire retirement planning benefits in the form of tax deductible retirement income insurance premiums; Social Security inclusion; or some other plan or combination of plans; and

WHEREAS, We have not been adequately informed on the advantages and disadvantages of these various plans; now, therefore, be it

Resolved, That the C.M.A. through its component County Medical Societies shall arrange and subsidize the dissemination of adequate unbiased information by pamphlet and speakers to interested County Medical Societies; and be it further

Resolved, That each County Medical Society shall study this information and any other information they wish and shall then poll their members as to the type of retirement planning benefits desired; and be it further

Resolved, That the results of these County Society polls shall be compiled by the C.M.A. and that the C.M.A. Delegates to the A.M.A. House of Delegates

be instructed to present a resolution to the 1957 Session indicating the desires of the majority of C.M.A. members and resolving that the A.M.A. request Federal legislation to that end.

(Reference Committee No. 3 noted in its report: It is the opinion of your committee that the intent of this resolution, which deals with retirement benefits for physicians, is admirable. The timing of the proposed survey is, however, questioned. Our representatives have for some time been, with due authorization of our elected delegates, actively supporting the Reed-Keogh bill. It would seem inadvisable that the proposed survey be carried out while action on this bill is still pending. If the Reed-Keogh bill or similar legislation should not pass, this resolution might be resubmitted.)

CONSTITUTIONAL AMENDMENT ADOPTED

The following amendment to the Constitution of the California Medical Association was introduced in the 1955 House of Delegates and, in accordance with present requirements of the Constitution, was placed on the table for one year. At the meeting of the House of Delegates held April 29, 1956, it was unanimously adopted.

WHEREAS, A new corporation has been established called PHYSICIANS' BENEVOLENCE FUND, INC., to administer the duties under Section 6 of Article IV of the Constitution of the California Medical Association; now, therefore, be it

Resolved, That Section 6 of Article IV of the Constitution which now reads:

"At least \$1.00 out of the annual dues paid by each active member of the Association shall be allocated to the Physicians' Benevolence Fund and shall only be used for the purposes as set forth in the By-Laws."

is hereby amended to read as follows:

"At least \$1.00 out of the annual dues paid by each active member of the Association shall be allocated to the Physicians' Benevolence Fund, Inc., a corporation, and shall be used for the purposes as set forth in that corporation's Articles and By-Laws."

BY-LAW AMENDMENT ADOPTED

The following amendment to the By-Laws of the California Medical Association was introduced in the form of a resolution, which was rephrased by Reference Committee No. 4 into an exact amendment to the By-Laws of the Association and unanimously adopted. The complete report of the Reference Committee, together with the original resolution, is shown here.

RESOLUTION No. 10

Introduced by: Matthew N. Hosmer.

Representing: San Francisco County.

Subject: Section on Internal Medicine.

WHEREAS, The Constitution of the California Medical Association states that the Scientific Assembly shall be divided into sections, each section representing that branch of medicine described in its title; and,

WHEREAS, It is desirable that the title of the scientific section should describe that branch of medicine represented by that section; and,

WHEREAS, The term "General Medicine" may be expected to include such specialties as allergy, syphilology and dermatology, and other branches of medicine, all of which have their own scientific sections in the California Medical Association and conduct their deliberations and presentations outside the scientific section of "General Medicine"; and

WHEREAS, The section on "General Medicine" now concerns itself with those subjects which are identified throughout the state and nation in scientific groups as "Internal Medicine"; therefore, be it

Resolved, That the California Medical Association House of Delegates discontinue the scientific section on "General Medicine" and create a scientific section to be titled, "Scientific Section on Internal Medicine."

Your Reference Committee has modified the "Resolved" of the above resolution to conform to the By-Laws of the California Medical Association as follows:

Resolved, That Chapter IV, Section 1 (a) of the By-Laws which now reads

"Section 1.—Division of Scientific Work

"(a) Scientific Sections. The scientific work of the Association shall be divided into seventeen scientific sections, as follows: General Medicine; General Surgery; Pediatrics; Ear, Nose and Throat; Urology; Anesthesiology; Obstetrics and Gynecology; Radiology; Industrial Medicine and Surgery; Pathology and Bacteriology; Dermatology and Syphilology; Neuropsychiatry; General Practice; Public Health; Allergy; Eye; and Orthopedics."

is hereby amended to read as follows:

Section 1.—Division of Scientific Work

"(a) Scientific Sections. The scientific work of the Association shall be divided into seventeen scientific sections, as follows: Internal Medicine; General Surgery; Pediatrics; Ear, Nose and Throat; Urology; Anesthesiology; Obstetrics and Gynecology; Radiology; Industrial Medicine and Surgery; Path-

Your Reference Committee recommends that this resolution, as rephrased and modified, *do pass*.

At the May 2, 1956, meeting of the House of Delegates the following officers were elected. Terms of office are indicated where they extend for more than one year.

Councilors—for terms ending 1959:

Second District.....Omer W. Wheeler, Riverside
Fifth District.....Robert O. Pearson, San Luis Obispo
Eighth District.....Samuel R. Sherman, San Francisco
Eleventh District.....Ralph C. Teall, Sacramento
At-Large.....Arthur A. Kirchner, Los Angeles
T. Eric Reynolds, Oakland

Sixth District.....Donald C. Harrington, Stockton

Delegates

Alternates

Leopold H. Frazer
E. Vincent Askey
Dwight L. Wilbur
Donald Cass
J. Lafe Ludwig
R. Stanley Kneeshaw
*C. J. Attwood

Hartzell H. Ray
Donald A. Charnock
James E. Feldmayer
J. Norman O'Neill
H. Milton Van Dyke
Burt Davis
Arlo A. Morrison
†J. E. Vaughan

Bert L. Halter
Merlin L. Newkirk
Leon O. Desimone

Robb Smith
Mr. Robert A. Hornby

*One-year term ending December 31, 1956.

†Unexpired term ending December 31, 1957; alternate to Frank A. MacDonald.

*Tentative Draft: Minutes of the 260th Meeting of
the Executive Committee, San Francisco, July 24,
1956.*

Roll Call:

A quorum present and acting.

Absent for cause were Council Chairman Lum and Editor Wilbur.

(a) On motion duly made and seconded, 119 delinquent members whose dues have been received since May 26, 1956, were voted reinstatement.

(b) On motion duly made and seconded in each instance, Doctors George W. Koch of Orange County and Alfred J. Cooper of San Diego County were voted Retired Membership.

(c) On motion duly made and seconded in each instance, 14 applicants were voted Associate Membership. These were: Anita E. Faverman, Alameda-Contra Costa County; Mary Hayes, Jack Schiff, Fresno County; Lester S. McLean, Humboldt County; Donald L. Hutchinson, Peter VanArsdale Lee, Faye G. Sheeley, Los Angeles County; Jack Levitt, Napa County; Eugene E. Bossi, Henry W. Turkel, H. E. Vandervoort, Albert E. Warrens, San Francisco County; L. H. Stahn, Stanislaus County; Joan R. Hart, Placer-Nevada-Sierra County.

(d) On motion duly made and seconded in each instance, 7 applicants were voted reductions of dues because of prolonged illness or postgraduate study.

2. Committee on Health and Accident Insurance:

(a) **Disability Insurance:** Discussion was held on proposals submitted by Lumberman's Mutual Casualty Co. in order to correct the serious losses being incurred through the disability insurance coverage available to association members.

On motion duly made and seconded, it was voted to accept a 3-year plan with a step-up premium according to age, paying a maximum monthly indemnity of \$400 with benefits beginning on the first day of injury or eighth day of illness.

(b) *Group Life Insurance:* Discussion was held on a proposal that group life insurance be made available to all California Medical Association physicians. The fee for retaining an insurance consultant to obtain bids and specifications would be approximately \$1,500-\$2,000.

On motion duly made and seconded, it was voted to refer this matter to the Council.

(c) *Catastrophic Hospital Plan:* Doctor Kirchner explained the \$300 deductible catastrophic hospital expense plan being offered to some county medical societies.

The committee recommends that a decision to

enter into such a program be left up to the respective county medical societies.

3. *Commission on Medical Services:*

(a) *New Member:* Discussion was held on the appointment of a new member to replace Doctor Ralph Teall, resigned.

(b) *Committee on Indigent Care:* On motion duly made and seconded, it was voted to accept the resignation of Dr. Hollis L. Carey as Chairman, and to appoint Dr. C. L. Cooley of San Francisco in his stead. Doctor Carey will remain on the committee.

On motion duly made and seconded, it was voted to authorize the Committee on Indigent Care to enter into a study with Stanford Medical School on the costs of providing medical care to the indigent in Butte County. The necessary funds to be allocated from the Commission budget if Foundation financing is not available.

(c) *Insurance Pamphlet:* The Commission recommended use of the C.M.A. mailing list by the Health Insurance Council for a mailing to all members of a pamphlet titled "Some Fundamentals of Health Insurance."

On motion duly made and seconded, it was voted to approve the mailing of this pamphlet.

(d) *Committee on Fees:* The Commission recommended that a subcommittee of the Committee on Fees be created to deal exclusively with the Industrial Accident Fee Schedule. On motion duly made and seconded, it was voted to create such a subcommittee with the following appointments: Doctors James H. Thompson of San Francisco, George D. Maner and Packard Thurber, Jr. of Los Angeles, and Francis J. Cox, San Francisco, Chairman.

4. *Committee on Mental Health:*

Discussion was held regarding the appointment of a new member to replace Dr. H. L. Gartshore, resigned. On motion duly made and seconded, it was voted to appoint Dr. Knox Finley to fill the unexpired term.

5. *House of Delegates—Transactions:*

On motion duly made and seconded it was voted to approve the publication of the proceedings of the

House of Delegates in summary form in CALIFORNIA MEDICINE.

6. *1958 and 1959 Annual Sessions:*

Discussion was held on the short lapse of time between the 1958 meetings of the C.M.A. and the A.M.A. in San Francisco. On motion duly made and seconded, it was voted to hold the 1958 C.M.A. meeting in Los Angeles and the 1959 meeting in San Francisco.

7. *Woman's Auxiliary:*

On motion duly made and seconded, it was voted to recommend to the Auxiliary that all matters be referred to the Auxiliary Advisory Board before coming to the Executive Committee or the Council.

8. *Advisory Committee to the State Alcoholic Rehabilitation Commission:*

A request from the State Alcoholic Rehabilitation Commission for C.M.A. representatives on its Advisory Committee was received.

On motion duly made and seconded, it was voted to appoint Doctors Hollis L. Carey of Gridley and Cullen Ward Irish of Los Angeles as the C.M.A. representatives to the Advisory Committee.

9. *Council Meetings:*

On motion duly made and seconded, it was voted to hold the next meeting of the Council in Los Angeles on Saturday, July 28, 1956.

On motion duly made and seconded, the matter of holding Council meetings in other parts of the state was referred to the Council.

10. *Health Fair:*

Doctor Charnock read a letter from the Los Angeles *Examiner* in which the paper offered to pay the expenses of a jointly sponsored Health Fair in Los Angeles in the fall of 1957.

On motion duly made and seconded, it was voted to refer this item to the Council.

Adjournment:

There being no further business to come before the committee, the meeting was adjourned at 12:15 p.m.

IVAN C. HERON, M.D., *Chairman*

ALBERT C. DANIELS, M.D., *Secretary*